Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03/21/2014	Address:	480 N 100 W
Incident #:	14ISPC002352		Knox, IN
County :	Starke		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
☐ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		☐ Residence☐ Outbuilding☐ Vehicle	☐ Hotel/Motel☐ Open – No Structure☐ Other:
(check all that	l: Location (bedroom, kitchen, open air, of apply) or Birch Reaction(s): open	etc)	
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s): outbuilding, open			
Flammable Solvents: outbuilding, vehicle			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Corrosive Acid:			
Corrosive Base: outbuilding			
Other (item and location): oxydizer / residence			
Vehicle Info	rmation:		
Owner: VIN: Year:	Phyllis Clemons 1Y1SK526XSZ012006 1995	Make: Model:	Geo Prizm
Child under age 18 discovered (check appropriate) Yes (number present) No Children not present but evidence they reside or visit often		Living conditions of home: clean disarray unclean Estimated length of time manufacturing had been occurring: Additional Information:	
This report l	has been faxed* or emailed to the fo	llowing agencies th	at serve the location:
Fire Department City, Township or County Knox VFD Fax: emailed Health Department County: Starke Co HD Fax: emailed Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-			: <u>emailed</u> <u>ed</u>
	ormation regarding this methamphetar Officer: <u>Maggie Shortt</u> Phon	mine laboratory, cont e <u>800-421-4912</u>	tact

^{*}This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.